

# **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| OMB APP     | ROVAL     |
|-------------|-----------|
| OMB Number: | 3235-0076 |

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**SEC USE ONLY** Prefix Serial

| •   |                                  | <del> </del>             |
|---|----------------------------------|--------------------------|
| Name of Offering (☐ check if this is an amendment and name has changed, and indic Sale of Limited Partnership Interests in Monsoon India Inflection Fund 2, L.P.  | ate change.)                     |                          |
| Filing under (Check box(es) that apply):  Type of Filing:  New Filing  Rule 504  Rule 505  Rule 506   | Section 4(6)                     | ULOE                     |
| A. BASIC IDENTIFICATION DATA  |                                  |                          |
| Enter the information requested about the issuer  |                                  |                          |
| Name of Issuer ( check if this is an amendment and name has changed, and indicate Monsoon India Inflection Fund 2, L.P.   | e change.)                       |                          |
| Address of Executive Offices (Number and Street, City, State, Zip Code) 4600 East-West Highway, Suite 575 Bethesda, MD 20814  | Telephone Nurr<br>(301) 222-8000 | 07076717                 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)   | Telephone Numb                   | er (Including Area Code) |
| Brief Description of Business Investments in Indian Securities  | <u> </u>                         | PROCESSEL                |
| Type of Business Organization   | _                                | SEP 1 1 2007             |
| ☐ corporation   | other ( <b>ple</b> ase spec      | ify):                    |
| ☐ business trust ☐ limited partnership, to be formed  |                                  | THOMSON                  |
| MONTH YEAR  |                                  | FINANCIAL                |
|   | Actual 🗌 E                       | Estimated                |
| Jurisdiction of Incorporation or Organization: (Enter two- letter U.S. Postal Service abbre CN for Canada; FN for other foreign jurisdiction of Incorporation or Organization: (Enter two- letter U.S. Postal Service abbre |                                  | DE                       |
| General Instructions  |                                  |                          |

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et sea. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part É and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on the ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

| . *  |                  | A. BASIC IDENTI                                    | FICATION DATA                | •                |   |
|--|------------------|--|------------------------------|------------------|---|
|  | f the issuer, if |  |                              |                  | eneficial owner having the ecurities of the issuer; |
| <ul> <li>Each executive of issuers; and</li> </ul>           | officer and dire | ctor of corporate issuer                           | s and of corporate gen       | eral managing pa | rtners of partnership                               |
| <ul> <li>Each general and</li> </ul>                         | d managing pa    | artnership of partnership                          | issuers.                     |                  |   |
| Check Box(es) that Apply:                                    | Promoter         | ☐ Beneficial Owner                                 | ☐ Executive Officer          | Director         | ☐ General and/or      Managing Partner              |
| Full Name (Last name first, if indiv<br>Monsoon Capital, LLC | vidual)          |  |                              |                  |   |
| Business or Residence Address<br>4600 East-West Highway, Su  |                  | and Street, City, State, Zip<br>Bethesda, MD 20814 | Code)                        |                  |   |
| Check Box(es) that Apply:                                    | Promoter         | ☐ Beneficial Owner                                 |                              | Director         | General and/or Managing Partner                     |
| Full Name (Last name first, if indiv                         | ridual)          |  |                              |                  |   |
| Business or Residence Address<br>4600 East-West Highway, Su  |                  | and Street, City, State, Zip<br>Bethesda, MD 20814 | Code)                        |                  |   |
| Check Box(es) that Apply:                                    | Promoter         | ☐ Beneficial Owner                                 | Executive Officer            | Director         | ☐ General and/or<br>Managing Partner                |
| Full Name (Last name first, if indiv                         | vidual)          |  |                              |                  |   |
| Business or Residence Address                                | (Number          | and Street, City, State, Zip                       | Code)                        |                  |   |
| Check Box(es) that Apply:                                    | Promoter         | ☐ Beneficial Owner                                 | ☐ Executive Officer          | Director         | General and/or Managing Partner                     |
| Full Name (Last name first, if indiv                         | vidual)          |  |                              | <del>_</del> '   |   |
| Business or Residence Address                                | (Number          | and Street, City, State, Zip                       | Code)                        |                  | <del></del>   |
| Check Box(es) that Apply:                                    | Promoter         | ☐ Beneficial Owner                                 | Executive Officer            | Director         | General and/or Managing Partner                     |
| Full Name (Last name first, if indiv                         | vidual)          |  |                              | _                | <u> </u>  |
| Business or Residence Address                                | (Number          | and Street, City, State, Zip                       | Code)                        |                  | <del></del>   |
| Check Box(es) that Apply:                                    | Promoter         | ☐ Beneficial Owner                                 | ☐ Executive Officer          | Director         | General and/or Managing Partner                     |
| Full Name (Last name first, if indiv                         | vidual)          |  |                              |                  |   |
| Business or Residence Address                                | (Number          | and Street, City, State, Zi                        | o Code)                      |                  | -   |
| Check Box(es) that Apply:                                    | Promoter         | ☐ Beneficial Owner                                 | ☐ Executive Officer          | Director         | General and/or Managing Partner                     |
| Full Name (Last name first, if indiv                         | vidual)          |  |                              |                  | ······································              |
| Business or Residence Address                                | (Number          | and Street, City, State, Zip                       | p Code)                      |                  |   |
| Check Box(es) that Apply:                                    | Promoter         | ☐ Beneficial Owner                                 | Executive Officer            | Director         | General and/or Managing Partner                     |
| Full Name (Last name first, if indiv                         | vidual)          |  |                              |                  |   |
| Business or Residence Address                                | (Number          | and Street, City, State, Zi                        | p Code)                      |                  |   |
|  | (Use blank st    | neet, or copy and use addit                        | tional copies of this sheet, | as necessary.)   |   |

| ĸ                                   | B. INFORMATION ABOUT OFFERING   |  |  |
|-------------------------------------|---|--|--|
| 1.                                  | Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?   | Yes  | No   |
|                                     | Answer also in Appendix, Column 2, if filing under ULOE.  |  |  |
| 2.                                  | What is the minimum investment that will be accepted from any individual?   | \$ <u>500,</u><br>subject<br>Gener<br>Partne<br>discre | at to<br>al<br>er's  |
| 3.                                  | Does the offering permit joint ownership of a single unit?  | Yes<br>⊠   | No<br>□  |
| 4.                                  | Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchases in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.   |  |  |
| Ful<br>N/A                          | Il Name (Last name first, if individual)  |  |  |
| Bu                                  | siness or Residence Address (Number and Street, City, State, Zip Code)  | -  |  |
| Na                                  | me of Associated Broker or Dealer   |  |  |
| (Cl<br>[AL]<br>[IL]<br>[MT]<br>[RI] | (inj   (iaj   (ksj   (kyj   (laj   (mej   (md)   (maj   (maj   (mn)   (mn)   (mn)   (inj   (mn)   (inj   (mn)   (inj   (mn)   (inj   (inj | .  Ali St<br>Hij                                       | ates<br>(ID)   |
|                                     | siness or Residence Address (Number and Street, City, State, Zip Code)  |  |  |
|                                     |   |  |  |
| Na<br>——                            | me of Associated Broker or Dealer   |  |  |
|                                     | ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers heck "All States" or check individual States)  | . □ All St   | atec   |
| [AL]                                | (AK)   (AZ)   (AR)   (CA)   (CO)   (CT)   (DE)   (DC)   (FI)   (GA)   (I<br>  (IN)   (IA)   (KS)   (KY)   (LA)   (ME)   (MD)   (MA)   (MI)   (MI)   (MN)   (I<br>  (NE)   (NY)   (NH)   (NH)   (NM)   (NY)   (NC)   (ND)   (OH)   (OK)   (IV)   | HI]  | (ID)   |
| Ful                                 | Il Name (Last name first, if individual)  |  |  |
| Bu                                  | siness or Residence Address (Number and Street, City, State, Zip Code)  |  |  |
| Na                                  | ume of Associated Broker or Dealer  |  |  |
|                                     | ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers  |  |  |
| [AL]                                |   |  | ates [ID]  [MO]  [PA]  [PR]  [ |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | alre<br>che | er the aggregate offering price of securities included in this offering and the total amount eady sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, eck this box and indicate in the columns below the amounts of the securities offered for change and already exchanged.  |                       |  |
|----|-------------|--|-----------------------|--|
|    |             |  | Aggregate             | Amount Already                             |
|    |             | Type of Security   | Offering Price        | Sold                                       |
|    |             | Debt   | \$                    | \$   |
|    |             | Equity   | \$                    | \$   |
|    |             | Common Preferred   | <b>^</b>              | •  |
|    |             | Convertible Securities (including warrants)  | \$ \$104.400.700      | \$   |
|    |             | Partnership Interests  | \$ <u>184,493,722</u> | \$ <u>184,493,722</u>                      |
|    |             | Other (Specify)  | \$                    | \$   |
|    |             | Total  | \$ <u>184,493,722</u> | \$ <u>184,493,722</u>                      |
| _  |             | Answer also in Appendix, Column 3, if filing under ULOE.   |                       |  |
| 2. | this<br>504 | er the number of accredited and non-accredited investors who have purchased securities in offering and the aggregate dollar amounts of their purchases. For offerings under Rule I, indicate the number of persons who have purchased securities and the aggregate dollar ount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."             | Number of Investors   | Aggregate<br>Dollar Amount<br>of Purchases |
|    |             | Accredited Investors   | 146                   | \$ <u>184,493,722</u>                      |
|    |             | Non-accredited Investors   |                       | \$0  |
|    |             | Total (for filing under Rule 504 only)   |                       | \$   |
|    |             | Answer also in Appendix, Column 4, if filing under ULOE.   |                       | · ——                                       |
| 3. | sec<br>mo   | nis filing is for an offering under Rule 504 or 505, enter the information requested for all surities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) on this prior to the first sale of securities in this offering. Classify securities by type listed in t C - Question 1.   |                       |  |
|    |             | Type of offering Rule 505  | Type of<br>Security   | Dollar Amount<br>Sold<br>\$                |
|    |             | Regulation A   |                       | \$   |
|    |             | Rule 504   |                       | \$<br>\$                                   |
|    |             | Total.   |                       | \$   |
| 4. | sec<br>issu | Furnish a statement of all expenses in connection with the issuance and distribution of the surities in this offering. Exclude amounts relating solely to organization expenses of the uer. The information may be given as subject to future contingencies. If the amount of an enditure is not known, furnish an estimate and check the box to the left of the estimate. |                       | <u> </u>                                   |
|    |             | Transfer Agent's Fees  |                       | \$   |
|    |             | Printing and Engraving Costs   |                       | \$   |
|    |             | Legal Fees.  | ⊠                     | \$ <u>12,000</u>                           |
|    |             | Accounting Fees.   |                       | \$   |
|    |             | Engineering Fees.  |                       | · <del></del>                              |
|    |             | Sales Commissions (specify finders' fees separately)   |                       | <del></del>                                |
|    |             |  |                       | Ф <u>——</u>                                |
|    |             | Other Expenses (identify)  |                       | Ф  |
|    |             | Total  | X                     | \$ <u>12,000</u>                           |
|    | b.          | Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."  |                       | \$ <u>184,481,722</u>                      |

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|   | E, NUMBER OF INVESTORS, EXPENSES A  |                   |             | CEEDS                                 |                       |
|---|---|-------------------|-------------|---------------------------------------|-----------------------|
| used for each of the purposes shown. If estimate and check the box to the left of   | d gross proceeds to the issuer used or proporthe amount for any purpose is not known, fur the estimate. The total of the payments listed issuer set forth in response to Part C- Ques | nish an<br>I must |             |                                       |                       |
|   |   |                   | Officers    | ments to<br>, Directors,<br>ffiliates | Payments to<br>Others |
| Salaries and fees   |   |                   | \$ <u>0</u> |                                       | \$ <u>0</u>           |
| Purchase of real estate   |   |                   | \$ <u>0</u> |                                       | \$ <u> </u>           |
| Purchase, rental or leasing and insta   | allation of machinery and equipment   |                   | \$ <u>0</u> |                                       | \$ <u>0</u>           |
| Acquisition of other business (includ   | lings and facilitiesing the value of securities involved in this offe   | ering             | \$ <u>0</u> |                                       | \$ <u>0</u>           |
|   | e assets or securities of another issuer pursu  |                   | \$ <u> </u> |                                       | \$ <u>0</u>           |
| Repayment of indebtedness   |   |                   | \$ <u> </u> |                                       | \$ <u>0</u>           |
| Working capital   |   |                   | \$ <u> </u> |                                       | \$ <u>0</u>           |
| Other (specify): Investments in secu  | rities  |                   | \$ <u>0</u> | $\boxtimes$                           | \$ <u>184,481,722</u> |
| Column Totals   |   |                   | \$ <u>0</u> | $\boxtimes$                           | \$ <u>184,481,722</u> |
| Total Payments Listed (column total   | s added)  |                   | $\boxtimes$ | \$184,481,722                         | 2                     |
|   | D. FEDERAL SIGNATURE  |                   |             |                                       |                       |
| The issuer has duly caused this notice to be sollowing signature constitutes an undertaking request of its staff, the information furnished | by the issuer to furnish to the U.S. Securitie  | s and Exc         | change C    | ommission, upo                        | n written             |
| Issuer (Print or Type) Monsoon India Inflection Fund 2, L.P.  | Signature S. W. Munthali  | Date              | at 21, 200  |                                       |                       |
| Name of Signer (Print or Type) Suzgo Munthali   | Title of Signer (Print or Type) Authorized Signatory of Monsoon Capita  | il, LLC           |             |                                       |                       |
|   |   |                   |             |                                       |                       |
|   |   |                   |             |                                       |                       |
|   | ATTENTION   |                   |             |                                       |                       |
| Intentional misstatements or omission   | ns of fact constitute federal criminal violat   | ions. (Se         | e 18 U.S    | .C. 1001.)                            |                       |

| •     |   | E. STATE SIGNATURE                              |                                     |           |  |  |  |
|-------|---|---|-------------------------------------|-----------|--|--|--|
| 1.    | Is any party described in 17 CFR 20 provisions of such rule?  | 30.252(c), (d), (e) or (f) presently subject to | any dis <b>q</b> ualification Yes N | <b>√o</b> |  |  |  |
|       |   | See Appendix, Column 5, for state respons       | se.                                 |           |  |  |  |
| 2.    | The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law   |   |                                     |           |  |  |  |
| 3.    | The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.   |   |                                     |           |  |  |  |
| 4.    | The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. |   |                                     |           |  |  |  |
| 5.    | The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.   |   |                                     |           |  |  |  |
| Issue | r (Print or Type)   | Signature                                       | Date                                |           |  |  |  |
| Mons  | soon India Inflection Fund 2, L.P.  | I.W. Munthali August 21, 200                    |                                     |           |  |  |  |
| Name  | e (Print or Type)   | Title (Print or Type)                           |                                     |           |  |  |  |
| Suzg  | o Munthali  | Authorized Signatory of Monsoon Capital, LLC    |                                     |           |  |  |  |

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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# **APPENDIX**

| 1     |                            | 2           | 3  | 4  |                     |   |   | 5. 5 |   |
|-------|----------------------------|-------------|--|--|---------------------|---|---|------|---|
|       | to n<br>accre<br>investors | -           | Type of Security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) | Type of investor and amount purchased in State |                     |   | Type of Security and aggregate offering price offered in state  Type of investor and explan explan amount purchased in State  under Sta (if yes, explan explan waiver |      | ification<br>ate ULOE<br>attach<br>ation of<br>granted)<br>-Item 1) |
| State | Yes                        | No          |  | Number of<br>Accredited<br>Investors           | Amount              | Number of Non-<br>Accredited<br>Investors | Amount  | Yes  | No  |
| AL    |                            |             |  |  | \$                  |   | \$  |      |   |
| AK    |                            |             |  |  | \$                  |   | \$  |      |   |
| AZ    |                            |             |  |  | \$                  |   | \$  |      |   |
| AR    |                            |             |  |  | \$                  |   | \$  |      |   |
| CA    |                            | $\boxtimes$ | limited partnership interests-\$24,150,000   | 26   | \$24,150,000        | 0   | \$0   |      |   |
| СО    |                            |             |  |  | \$                  |   | \$  |      |   |
| СТ    |                            | X           | limited partnership<br>interests-\$7,475,000   | 11   | \$7,475,000         | 0   | \$0   |      |   |
| DE    |                            | ×           | limited partnership interests-\$17,800,000   | 12   | \$17,800,000        | 0   | \$0   |      | ⊠   |
| DC    |                            |             | limited partnership interests-\$500,000  | t  | \$500,000           | 0   | \$0   |      |   |
| FL    |                            | ⊠           | limited partnership interests-\$12,900,000   | 7  | \$12,900,000        | 0 ·                                       | \$0   |      | Ø   |
| GA    |                            |             |  |  | \$                  |   | \$  |      |   |
| Н     |                            |             |  | :  | \$                  |   | \$  |      |   |
| ID    |                            |             |  |  | \$                  |   | \$  |      |   |
| IL    |                            | ⊠           | limited partnership interests-\$1,500,000  | 2  | \$1,500,000         | 0   | \$0   |      |   |
| IN    |                            |             |  |  | \$                  |   | \$  |      |   |
| IA    |                            |             |  |  | \$                  |   | \$  |      |   |
| KS    |                            | ⊠           | limited partnership interests - \$3,000,000  | 1  | \$ <u>3,000,000</u> | 0   | \$ <u>0</u>   |      | ⊠   |
| KY    |                            | ⊠           | limited partnership interests-\$500,000  | 1  | \$500,000           | 0   | \$0   |      |   |
| LA    |                            |             |  |  | \$                  |   | \$  |      |   |
| ME    |                            |             |  |  | \$                  |   | \$  |      |   |
| MD    |                            | ⊠           | limited partnership interests - \$3,175,000  | 6  | \$ <u>3,175,000</u> | 0   | \$ <u>0</u>   |      | ⊠   |
| MA    |                            | ×           | limited partnership interests-\$20,775,000   | 25   | \$20,775,000        | 0   | \$0   |      | Ø   |
| МІ    |                            |             |  |  | \$                  |   | \$  |      |   |
| MN    |                            |             |  |  | \$                  |   | \$  |      |   |
| MS    |                            |             |  |  | \$                  |   | \$  |      |   |
| МО    |                            |             |  |  | \$                  |   | \$  |      |   |

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|   |              | <br>     |  |
|---|--------------|----------|--|
| • | <br>APPENDIX |          |  |
|   | <br>         | <br>···· |  |

| 1     |                           | 2   | 3  | 4 5  |                     |  |             | 5   |  |
|-------|---------------------------|---|--|--|---------------------|--|-------------|-----|--|
|       | to a<br>accre<br>investor | I to sell<br>non-<br>edited<br>s in State<br>I-Item1) | Type of Security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) | te of Security d aggregate fering price red in state  unde (if expected in state)  unde (if expected in state)  unde (if expected in state)  value  unde (if expected in state)  value  value |                     | Type of investor and amount purchased in State |             |     | ification ate ULOE attach ation of granted) -Item 1) |
| State | Yes                       | No  |  | Number of<br>Accredited<br>Investors   | Amount              | Number of Non-<br>Accredited<br>Investors      | Amount      | Yes | No   |
| MT    |                           |   |  |  | \$                  |  | \$          |     |  |
| NE    |                           |   |  |  | \$                  |  | \$          |     |  |
| NV    |                           | ×   | limited partnership interets - \$2,500,000   | 2  | \$ <u>2,500,000</u> | 0  | \$ <u>0</u> |     | ⊠  |
| NH    |                           |   |  |  | \$                  |  | \$          |     |  |
| NJ    |                           | ⋈   | limited partnership interests-\$2,000,000  | 2  | \$2,000,000         | o ·  | \$0         |     | ⋈  |
| NM    |                           |   |  |  | \$                  |  | \$          |     |  |
| NY    |                           | ×   | limited partnership interests-\$34,268,722   | 29   | \$34,268,722        | 0  | \$0         |     | ⊠  |
| NC    |                           | ⋈   | limited partnership interests \$1,800,000  | 2  | \$ <u>1,800,000</u> | 0  | \$ <u>0</u> |     | ⊠  |
| ND    |                           |   |  |  | \$                  |  | \$          |     |  |
| ОН    |                           | $\boxtimes$   | limited partnership interests-\$11,300,000   | 2  | \$11,300,000        | 0  | \$0         |     | ⊠  |
| ОК    |                           | Ø   | limited partnership interests \$1,000,000  | 2  | \$ <u>1,000,000</u> |  | \$          |     |  |
| OR    |                           | ×   | limited partnership interests - \$250,000  | 1  | \$ <u>250,000</u>   | 0  | \$ <u>0</u> |     |  |
| PA    |                           |   |  |  | \$                  | ·  | \$          |     |  |
| RI    |                           |   |  |  | \$                  |  | \$          |     |  |
| SC    |                           |   |  |  | \$                  | ·  | \$          |     |  |
| SD    |                           |   |  |  | \$                  |  | \$          |     |  |
| TN    |                           |   |  |  | \$                  |  | \$          |     |  |
| TX    |                           | ☒   | limited partnership interests-\$25,500,000   | 4  | \$25,500,000        | 0  | \$0         |     | ⊠  |
| UT    |                           |   |  |  | \$                  |  | \$          |     |  |
| VT    |                           |   |  |  | \$                  |  | \$          |     |  |
| VA    |                           | ⋈   | limited partnership interests-\$8,100,000  | 6  | \$8,100,000         | 0  | \$0         |     | ⊠  |
| WA    |                           |   |  | <u> </u>   | \$                  |  | \$          |     |  |
| wv    |                           |   |  |  | \$                  |  | \$          |     |  |
| WI    |                           |   |  |  | \$                  |  | \$          |     |  |
| WY    |                           |   |  |  | \$                  |  | \$          |     |  |
| PR    |                           |   | No. Standard Co.   |  | \$                  |  | \$          |     |  |
| Other |                           | Ø   | limited partnership interests-\$6,000,000  | 4  | \$6,000,000         | 0  | \$0         |     | ⊠  |

